-													
PATENT APPLICATION FEE DETERMINATION REC								Application or Docket Number					
Effective October 1, 2003								K-0629					
		CLAIMS A	S FILED		SMALL ENTITY OTHER TH								
<u> -</u>			(Colum	(Column 1) (Col						OR SMALL ENTIT			
	OTAL CLAIMS	76 -	76				RATE	FEE		RATE	FEE		
LE	OR	NUMBER	NUMBER FILED		NUMBER EXTRA -		BASIC F	EE =385.0	0- OR	BASIC FEI	E -770:00		
Τ(OTAL CHARGE	26- m	26_ minus 20=		. 6		-XS 9=		OR	XS18=	108		
INI	DEPENDENT C	3 m	3 minus 3 =		•		X43=		OR	You	100		
:Mi	JETIPLE DEPE	NDENT CLAIM P	PRESENT	as att					 			-	
الثد	f=the_difference	e-in-column_1 is	s less than 2	ero-enter		column 2=		+145= TOTAL	, v	OR	<u></u>		
	*If the difference in column 1 is less than zero, enter=02 in column 2									OR	·	87 8	
	CLAIMS AS AMENDED - PART II (Column 2) (Col							SMAL	L ENTITY	OR-	OTHER SMALL	R THAN ENTITY	
V		CLAIMS REMAINING	·	HIGH	EST	PRESENT	1 [ADDI-	7		ADDI-	
		AFTER AMENDMENT		PREVIO PAID F	DUSLY	EXTRA		RATE	TIONAL	-	RATE	TIONAL FEE	
AMENDMENT	Total	* -	Minus	**		= .		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=		X43=			.X86=		
_	FIRST PRESE	ENTATION OF M	ULTIPLE DE	ILTIPLE DEPENDENT		м				OR	· ·	-	
								+145=		OR	+290=		
		(Column 1)						TOTA ADDIT. FEI		OR ,	TOTAL ADDIT. FEE		
	1 Text - makes they below a region to the			· 1 · · · · · ·	-								
IT B		REMAINING AFTER		HIGHE NUMB PREVIO	BER	PRESENT EXTRA		RATE .	ADDI-		RATE	ADDI- TIONAL	
MENT		AMENDMENT		PAID F		EATRA			FEE]		FEE	
AMEND	-Total	*	Minus			=		X\$ 9=		OR	X\$18=	-	
AM	Independent	NTATION.OF. MU	Minus	HAN DENIT	CITAIN.	=		X43=		OR	X86=		
		MAZITON.OT. MIC	, ,	-EMDEM!	CLAIM.			+145=		OR	+290=		
aconida o	Notes of the state							TOTAL		00	TOTAL		
	(Column 1) (Column 2) (Column 3)							DDIT. FEE	<u> </u>	JOH Y	ADDIT. FEE		
	\	- CLAIMS -	-	(Colum		(Column 3)	- <u>-</u>			1 · F			
AMENDMENT C	.,	REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID FO	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NO.	Total	*	Minus	**		=	T	X\$ 9=		ŐЯ	X\$18=		
AME			Minus	***		=	H	X43=		OR	X86=		
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	'ENDENT (CLAIM		-	+145=	 			<u> </u>	
• 11	 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. 									OR	+290=		
H	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE		
T	he "Highest Num!	ber Previously Paid	I For (Total or	Independen	it) is the f	highest number	found	d in the ap	propriate bo	k in co lu	mn 1.		
									•	٠.	•		